## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
(571)-273-2885

INSTRUCTIONS: This for appropriate. All further conditions and indicated unless corrected maintenance fee notifications.	orm should be used for prespondence includin below or directed oth ons.	or transmitting the ISSU g the Patent, advance or erwise in Block 1, by (a	E FEE and PUBLICATI ders and notification of n ) specifying a new corres	ON FEE (if requient naintenance fees we pondence address;	red). Blocks I tl ill be mailed to I and/or (b) indica	hrough 5 shi the current of ting a separ	ould be completed where correspondence address as ate "FEE ADDRESS" for			
CURRENT CORRESPONDEN	CE ADDRESS (Note: Use Blo	ock 1 for any change of address)	Fee(	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
ADE & COMPA 2157 Henderson F WINNIPEG, MB	Iighway	2009		Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.						
CANADA	•			(Depositor's name)						
						(Signature)				
_			L				(Date)			
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOC	KET NO.	CONFIRMATION NO.			
10/766,325 01/29/2004 . Laurence W. Davies 80210-952 ADB 1242 FITLE OF INVENTION: PULTRUDED PART REINFORCED BY LONGITUDINAL AND TRANSVERSE FIBERS AND A METHOD OF MANUFACTURING THEREOF										
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL I	FEE(S) DUE	DATE DUE			
nonprovisional	NO	\$1510	\$300	\$0	\$	1810	04/09/2009			
EXAMÍN	(ER	ART UNIT	CLASS-SUBCLASS							
RUDDOCK, ULA CORINNA		1794	428-113000	•						
1. Change of corresponden CFR 1.363).  Change of correspon Address form PTO/SB/ "Fee Address" indic PTO/SB/47; Rev 03-02 Number is required.	ndence address (or Chai 122) attached. ation (or "Fee Address"	nge of Correspondence	(1) the names of up to or agents OR, alternative (2) the name of a single	ingle firm (having as a member a or agent) and the names of up to attorneys or agents. If no name is 3 Customer No: 23529						
PLEASE NOTE: Unles recordation as set forth (A) NAME OF ASSIGN Omniglass Li	ss an assignee is identi in 37 CFR 3.11. Comp NEE td.	fied below, no assignee eletion of this form is NO	(B) RESIDENCE: (CITY 1205 Sherwin I	atent. If an assigned assignment. Tand STATE OR CORON ROAD, Winni	ou <u>ntry)</u> peg, Manit	toba, Ca	inada R3H 0V1			
Please check the appropria	te assignce category or				-					
4a. The following fee(s) ar  Issue Fee  Publication Fee (No  Advance Order - #	small entity discount p	ermitted)	o. Payment of Fee(s): (Ple:  A check is enclosed.  Payment by credit can  the Director is hereby overpayment, to Depo	d. Form PTO-2038	is attached.					
5. Change in Entity Statu			☐ b. Applicant is no lon	ger claiming SMAI	[ FNTITV statu	s See 37 CF	R 1 27(a)(2)			
NOTE: The Issue Fee and	Publication Fee (if rem	fired) will not be accepted	d from anyone other than t							
interest as shown by the re  Authorized Signature	cords of the United Sta	tes Patent and Trademark	Office.	<sub>Date</sub> . Jai	าuary 26, 2	2009				
Typed or printed name	Adrian D. I	Battison			nuary 26, 2 。31,					
This collection of informa an application. Confidenti- submitting the completed this form and/or suggestio Box 1450, Alexandria, Vi Alexandria, Virginia 2231	anty is governed by 35 application form to the ons for reducing this burginia 22313-1450. DC	USPTO. Time will vary rden, should be sent to the NOT SEND FEES OR	depending upon the indiv	vidual case. Any co er, U.S. Patent and O'THIS ADDRESS	mments on the a Trademark Office SEND TO: Cor	mount of tine, U.S. Depa	ie you require to complete rument of Commerce, P.O. or Patents, P.O. Box 1450,			

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where n

appropriate. All further indicated unless correct maintenance fee notifica	correspondence including to below or directed oth tions.	ig the Patent, advance or serwise in Block 1, by (a	ders and notification of a specifying a new corre	maintenance fees wil spondence address; a	I be mailed to the current ind/or (b) indicating a sepa	correspondence address as arate "FEE ADDRESS" for				
	ENCE ADDRESS (Note: Use Bl		Fee	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
23529 ADE & COMF 2157 Henderson WINNIPEG, MI	Highway	/2009	I h Sta ade trac	Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.						
CANADA						(Depositor's name)				
						(Signature)				
			L			(Date)				
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.				
10/766,325 01/29/2004 Laurence W. Davies 80210-952 ADB 1242 TITLE OF INVENTION: PULTRUDED PART REINFORCED BY LONGITUDINAL AND TRANSVERSE FIBERS AND A METHOD OF MANUFACTURING THEREOF										
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE				
nonprovisional	NO	\$1510	\$300	\$0	\$1810	04/09/2009				
EXAM	IINER	ART UNIT	CLASS-SUBCLASS							
RUDDOCK, ULA CORINNA		1794	428-113000							
CFR 1.363).  Change of corresp Address form PTO/S	lication (or "Fee Address 02 or more recent) attacl	inge of Correspondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  Adrian D. Battison  Ade & Company Inc.  Customer No: 23529							
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Omniglass Ltd.  1205 Sherwin Road, Winnipeg, Manitoba, Canada R3H 0V1										
Please check the appropr	riate assignee category or	categories (will not be pr	rinted on the patent) :	Individual 🖫 Cor	poration or other private gro	oup entity Government				
	are submitted: No small entity discount p # of Copies	permitted)	<ul> <li>b. Payment of Fcc(s): (Please first reapply any previously paid issue fee shown above)</li> <li>A check is enclosed.</li> <li>Payment by credit card. Form PTO-2038 is attached.</li> <li>The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 21-0310 (enclose an extra copy of this form).</li> </ul>							
	itus (from status indicate			17	DESTRUCTION CON 27 C	F9 1 27(a)(2)				
NOTE: The Issue Fee ar	ns SMALL ENTITY state and Publication Fee (if red	us. See 37 CFR 1.27.			L ENTITY status. See 37 C lered attorney or agent; or the	he assignce or other party in				
	records of the Onlied Su		Connee.							
Typed or printed nan	<sub>ie</sub> Adrian D↓	Battison	· ·		uary 26, 2009 ,31,726					
This collection of inform an application, Confider submitting the complete this form and/or suggest Box 1450, Alexandria, V Alexandria, Virginia 22.	nation is required by 37 ( stiality is governed by 35 d application form to the lons for reducing this bu virginia 22313-1450. DO 313-1450.	CFR 1.311. The information U.S.C. 122 and 37 CFR to USPTO. Time will vary traden, should be sent to the NOT SEND FEES OR	depending upon the industrial description of the Completed Forms of the Completed Forms of the Complete of the	cer, U.S. Patent and T TO THIS ADDRESS.	e public which is to file (an inutes to complete, including ments on the amount of ti- rademark Office, U.S. Dep SEND TO: Commissioner isplays a valid OMB control	d by the USPTO to process) ng gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450.				